Case 19-16657-ABA Doc 15 Filed 05/07/19 Entered 05/07/19 09:48:25 Desc Main

	Docum	ICIIL FAUC I UI I	
rmation to identify your	case:		
Lori K. Valentine			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY CAMDEN VICINAGE	
19-16657-ABA			
	Lori K. Valentine First Name  First Name  Bankruptcy Court for the:	Lori K. Valentine First Name Middle Name  First Name Middle Name  Bankruptcy Court for the: DISTRICT OF NEW JE	Lori K. Valentine First Name Middle Name Last Name First Name Middle Name Last Name  Bankruptcy Court for the: DISTRICT OF NEW JERSEY CAMDEN VICINAGE

Check if this is an amended filing

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct y

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	179,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,738.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	189,738.00
Par	t 2: Summarize Your Liabilities		
			i <b>abilities</b> nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	270,031.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	800.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	7,853.00
	Your total liabilities	\$	278,684.00
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,319.00
j.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,016.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Lori K. Valentine Case number (if known) 19-16657-ABA

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_2,695.80

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	800.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	800.00

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	in this information to the btor 1	to identify your c Lori K. Vale					-				
De	btor 2	2011111111111				_					
` `	ouse, if filing)	stay Court for the	: DISTRICT OF NEW J	EDSEV CAMDEN VI	CINIACE						
	·	•	. DISTRICT OF NEW J	ERSET CAMPEN VI	CINAGE						
	se number 19-	-16657-ABA		-				k if this is			
								n amende supplem	J	g postpetition	chapter
										llowing date:	
<u>O</u>	fficial Form	<u> 1061</u>					N	1M / DD/ \	/YYY		
S	chedule I:	Your Inc	ome								12/1
spo	buse. If you are sep uch a separate she	parated and you	are married and not filing wing spouse is not filing wing wing the top of any additions.	ith you, do not inclu	de infori	nati	on abou	your sp	ouse. If mo	re space is	needed,
1.	Fill in your empl information.	oyment		Debtor 1				Debtor 2	2 or non-fil	ing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	•	Employment status	☐ Employed	☐ Employed			☐ Empl	oyed		
		Employment status	■ Not employed				☐ Not employed				
	. ,		Occupation	Unemployed - 7	month	S					
	Include part-time, self-employed wo		Employer's name								
	Occupation may or homemaker, if		Employer's address								
			How long employed to	here?				_			
Pa	rt 2: Give De	tails About Moi	nthly Income								
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to r	eport for	any	line, write	9 \$0 in the	space. Inc	lude your no	n-filing
	ou or your non-filing e space, attach a s		ore than one employer, co	ombine the informatio	n for all e	mpl	oyers for	that perso	on on the lir	nes below. If	you need
							For Del	otor 1		otor 2 or ng spouse	
2.			ry, and commissions (bocalculate what the monthle		2.	\$		0.00	\$	N/A	-
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Debt	or 1	Lori K. Valentine	_	Case	number (if known)	19-16657-	ABA	
				For	Debtor 1	For Debto		
	Cor	by line 4 here	4.	\$	0.00	non-filing	Spouse N/A	
	OO	by line 4 here	٦.	Ψ	0.00	Ψ	IVA	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	-
	5e.	Insurance	5e.	\$_ \$	0.00	\$	N/A	-
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	\$ 	0.00	\$	N/A N/A	=
	5h.	Other deductions. Specify:	5h.+	· —	0.00	+ \$	N/A	-
6.		· · · · · · · · · · · · · · · · · · ·	_ 6.	\$ \$				-
		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.		<b>–</b>	0.00	· <del></del>	N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	-
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total	0.0	¢.	0.00	œ.	NI/A	
	8b.	monthly net income.  Interest and dividends	8a. 8b.	\$_ \$	0.00	\$ 	N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	OD.	Ψ	0.00	Ψ	N/A	-
		Include alimony, spousal support, child support, maintenance, divorce	0 -	•		•		
	04	settlement, and property settlement.	8c. 8d.	\$_ \$	0.00	\$	N/A	-
	8d. 8e.	Unemployment compensation Social Security	8e.	\$ 	0.00 1,477.00	\$	N/A N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental		Ψ	1,477.00	*		-
		Nutrition Assistance Program) or housing subsidies.	01	•	100.00	Φ.		
	0	Specify: Food stamps	8f.	\$_ \$	192.00	\$ 	N/A	-
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.+	· —	0.00	· · · · · · · · · · · · · · · · · · ·	N/A N/A	-
	OII.	Other monthly mcome. Specify.	_ 011.+	Ψ	0.00	ΤΦ	IN/A	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,669.00	\$	N/A	<u> </u>
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		1,669.00 + \$	N/A	. = \$	1,669.00
	Add	I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,		j [	,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not exify:  Contribution from sister	depen	,	•	ed in <i>Schedu</i>	le J. +\$	650.00
12.		the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies						2,319.00
							Combin	ned y income
13.	Do ■ □	you expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?					y mcome

Official Form 106l Schedule I: Your Income page 2

EHI	in this i <del>nformati</del>	ion to identif						
		ion to identify yo	our case:					
Deb	otor 1	Lori K. Valen	tine			Ch	eck if this is:	
Dah	tor O					_	An amended filing	
1	otor 2 ouse, if filing)							wing postpetition chapter the following date:
Unit	ted States Bankru	iptcy Court for the:	VICINA	CT OF NEW JERSEY CAN GE	MDEN		MM / DD / YYYY	
1	nown)	-16657-ABA						
O	fficial Fo	rm 106J						
S	chedule	J: Your I	Exper	ises				12/1
info	ormation. If mo	ore space is ne n). Answer ever	eded, atta y questio	. If two married people ar ich another sheet to this n.				
Par 1.	Is this a joint	be Your House t case?	noia					
	■ No. Go to							
		=:	n a separ	ate household?				
	□ No	)		al Form 106J-2, <i>Expenses</i>	for Separate Househ	nold of De	btor 2.	
2.	Do you have	dependents?	■ No					
	Do not list De Debtor 2.	-	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
		ho						□ No
	Do not state t dependents n							☐ Yes
	•							□ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do your exp	enses include						☐ Yes
0.	expenses of	people other the people of the	han $_{\square}$	No Yes				
Par		te Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
the	value of such	assistance and		government assistance is cluded it on Schedule I: Y			Va a	
(Of	ficial Form 106	SI.)					Your exp	enses
4.		r home owners d any rent for the		ses for your residence. In or lot.	nclude first mortgage	4.	\$	1,000.00
	If not include	ed in line 4:						
	4a. Real es	state taxes				4a.	\$	0.00
	•	ty, homeowner's				4b.		0.00
				upkeep expenses		4c.	·	0.00
5.		owner's associat		dominium dues <b>our residence,</b> such as ho	me equity loans	4d. 5.	·	0.00 0.00

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Debtor '	Lori K. Valentine	Case number (if known)	19-16657-ABA
6. Uti	lities:		
6a.		6a. \$	145.00
6b.	•	6b. \$	25.00
6c.		6c. \$	130.00
6d.		6d. \$	80.00
	od and housekeeping supplies	7. \$	130.00
	ildcare and children's education costs	8. \$	0.00
_	othing, laundry, and dry cleaning	9. \$	10.00
	rsonal care products and services	10. \$	25.00
	dical and dental expenses	11. \$	20.00
	•	П. Ф	20.00
	ansportation. Include gas, maintenance, bus or train fare. not include car payments.	12. \$	50.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	10.00
	aritable contributions and religious donations	14. \$	0.00
	surance.	ιτ. ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.		
	a. Life insurance	15a. \$	0.00
	b. Health insurance	15b. \$	0.00
	c. Vehicle insurance	15c. \$	130.00
		· —	
	d. Other insurance. Specify:	15d. \$	0.00
	xes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16. \$	0.00
	stallment or lease payments:		0.00
178	a. Car payments for Vehicle 1	17a. \$	261.00
17	o. Car payments for Vehicle 2	17b. \$	0.00
170	c. Other. Specify:	17c. \$	0.00
170	d. Other. Specify:	17d. \$	0.00
3. <b>Yo</b>	ur payments of alimony, maintenance, and support that you did not report as		0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
	her payments you make to support others who do not live with you.	\$	0.00
	ecify:	19.	
	her real property expenses not included in lines 4 or 5 of this form or on Scho		
	a. Mortgages on other property	20a. \$	0.00
201	o. Real estate taxes	20b. \$	0.00
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00
200	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20	e. Homeowner's association or condominium dues	20e. \$	0.00
. Otl	her: Specify:	21. +\$	0.00
2. <b>Ca</b>	Iculate your monthly expenses		
	a. Add lines 4 through 21.	\$	2,016.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	_,,,,,,,,
			2.040.00
	c. Add line 22a and 22b. The result is your monthly expenses.	\$	2,016.00
	Iculate your monthly net income.		
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,319.00
231	o. Copy your monthly expenses from line 22c above.	23b\$	2,016.00
230	c. Subtract your monthly expenses from your monthly income.		
_2	The result is your monthly net income.	23c. \$	303.00
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?		rease or decrease because c
	, , , ,		
	No.		
L	Yes. Explain here:		

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Fill in this infor	mation to identify your	case:		
Debtor 1	Lori K. Valentine			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY CAMDEN VICINAGE	
Case number	19-16657-ABA			
(ii kilowii)				

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who i	s NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have that they are true and correct.  X /s/ Lori K. Valentine Lori K. Valentine	e read the summary and schedules filed with this declaration and  X Signature of Debtor 2